PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

CURRENT CORRESPONDE	NCE ADDRESS (Note: Use)	Block 1 for any change of address) N	ote: A certificate of	mailing can only be used f	or domestic mailings of the	
F. CHAU & ASSOCIATES, LLC 130 WOODBURY ROAD WOODBURY, NY 11797				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
46069 F. CHAU & AS	2/2010	Certificate of Mailing or Transmission					
130 WOODBUR	Y ROAD	01411	The w	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
WOODBURY, N	PART & TRADI		insmitted to the USP	Stop ISSUE FEE address TO (571) 273-2885, on the	above, or being facsimile date indicated below.		
		War S Trans	MARKU	*		(Depositor's name)	
		THAU	<u> </u>			(Signature)	
						(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/286,099 TITLE OF INVENTION:	04/02/1999 SVSTEM AND ME	TUOD FOR BYGGOR	RAIMO BAKIS				
TITLE OF INVENTION: SYSTEM AND METHOD FOR RESCORING N-BEST HYPOTHESES OF AN AUTOMATIC SPEECH RECOGNITION SYSTEM							
APPLN. TYPE	SMALL ENTITY	issue fee due	PUBLICATION PEE DUE	PREV. PAID ISSUE	FEE TOTAL PEB(S) DUB	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	06/14/2010	
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS	7	•		
ARMSTRONG,	ANGELA A	2626	704-247000	J			
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list F. Chau & Associates LLC							
Change of correspon	dence address (or Cha	age of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively.				
Address form PTO/SB/1	22) attached.	Indication form	(2) the name of a single firm (having as a member a				
TFoe Address" indica PTO/SB/47; Rev 03-02 Number is required.	or more recent) attache	ed. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
INTERNATIONAL BUSINESS MACHINES CORPORATION ARMONK, NEW YORK							
The state of the s							
4a. The following fee(s) are submitted:			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies1			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500510 (IBM enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above)							
u a. Applicant claims Sh	MALL ENTITY status.	See 37 CFR 1.27.	b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature	$$ $\overline{\mathcal{I}}$		··· ·	Date _ 06/48/2	1 01		
Typed or printed name	Frank Chau	·	-	Registration No.	501 34 4 536. 00 DA		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)							
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450,							
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							